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Substitute for form 1449B/PTO	Complete if Known		
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT	. First Named Inventor	DEEM, MARK E.	
APR 2 6 200 7	Art Unit	3739	
(use as many sheets as necessary)	Examiner Name	Unassigned	
TRADEM Sheet 3 of	. Attorney Docket Number	020979-001610US	

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		Document Number			
Examiner Initials*	Cite No. ¹	Number Kind Code ² (# known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Initials*	Cite No.1	Foreign Patent Document			Name of Patentee or	Pages, Columns, Lines, Where Relevant			
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